

# CLIENT INTAKE FORM

## CLIENT INFORMATION

Name(s):

Service Address:

Home Phone:

Mobile Phone:

Work Phone:

Email:

## ACCESS INFORMATION

Gate Code:

Door Code:

Garage Code:

Key Issue:

Alarm Code:

Guest WiFi Password:

Parking:

Other:

## DOGS

Name(s):

Friendly

Not Friendly

Where are they kept:

Special Instructions:

## CATS

Name(s):

Indoor

Outdoor

Where are they kept:

Special Instructions:

## GARBAGE

Trash: Empty

Don't Empty

Recycling: Empty

Don't Empty

Trash Bag Location:

Outdoor Garbage & Recycling Locations:

## FLOOR CLEANING

Choose one: Vinegar/Water  Hardwood/Laminate Cleaner  Murphy's Oil Soap  Other

Special Instructions:



# CLIENT INTAKE FORM

## HOUSEHOLD INFORMATION

Fragile Item(s):

Special Attention:

Don't Touch:

Damaged Items:

Other:

## À LA CARTE SERVICES (FEES APPLY)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Organization Services            | <input type="checkbox"/> Laundry Services   | <input type="checkbox"/> Fridge/Freezer Cleaning |
| <input type="checkbox"/> Linen Services (Standard)        | <input type="checkbox"/> Oven Cleaning      | <input type="checkbox"/> Interior Windows        |
| <input type="checkbox"/> Linen Services (Duvet/Euro Sham) | <input type="checkbox"/> Dishwashing        | <input type="checkbox"/> Quarterly Deep Clean    |
| <input type="checkbox"/> Window Tracks                    | <input type="checkbox"/> Wipe Down Woodwork | <input type="checkbox"/> Vacuum Crevices         |

## DATE & TIME PREFERENCES

Preferred Cleaning Day(s):

Preferred Cleaning Times:

## OTHER NOTES

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

